



5411 23rd St E, Fife, WA  
(253) 922-9624

# Development Review Committee (DRC) Meeting Request Form

City of Fife  
Date  
Stamp

Date and Time Requested: \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Applicant (if different) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Name of Proposal \_\_\_\_\_

Site Address \_\_\_\_\_

Parcel Number(s) \_\_\_\_\_

Existing Land Use \_\_\_\_\_

Description of Project

### ACKNOWLEDGEMENT

I certify that the information in this meeting request, including all submittals and attachments, is true and correct to the best of my knowledge. I also acknowledge the DRC meeting is for informational purposes only and does not “vest” an application. Information provided by City staff at DRC meetings is general, not binding and will not be construed as an approval of a concept or design.

Signature \_\_\_\_\_

<i>For City staff use</i>			
Comprehensive Plan Designation	_____	Existing Zoning	_____
Critical Areas Onsite?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, type:	_____
Floodplain?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Occupancy:	_____